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Application Number	10/574,122
Filing Date	11/22/2006
First Named Inventor	Axel Bouchon
Art Unit	1614
Examiner Name	Erich A. Leeser
Attorney Docket Number	078503.0105

I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 21003 Please change the correspondence address for the above-identified application to: The address associated with 21003 Customer Number: OR Firm or Individual Name Address City State Zip Country Telephone Email I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. $\overline{\mathbf{V}}$ Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name MANTHE Date Telephone achiler x +44 1223 493937 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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STATEMENT UNDER 37 CFR 3.73(b)	
Applicant/Patent Owner: Axel Bouchon	
Application No./Patent No.: <u>10/574,122</u> Filed/Issue Date: <u>11/22/2006</u>	
Entitled: TETRAHYDRO-NAPHTHALENE AND UREA DERIVATIVES	
Xention Limited , a (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)	
states that it is: 1. [_] the assignee of the entire right, title, and interest; or	
2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)	
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A A assignment from the inventor(s) of the petent application/petent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reed, Frame, or for which a copy the	
B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:	
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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.	
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